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7590

06/02/2006

Ansel M. Schwartz
 201 N. Craig Street, Suite 304
 Pittsburgh, PA 15213
 09/12/2006 FHETER12 00000041 09932896

01 FC:1501 1400.00 OP
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Tracey L. Klaas	(Depositor's name)
<i>Tracey L. Klaas</i>	(Signature)
September 5, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/932,896	08/20/2001	Michael Leon Kazar	SPIN-3	8068

TITLE OF INVENTION: METHOD AND SYSTEM FOR SAFELY ARBITRATING DISK DRIVE OWNERSHIP USING A TIMESTAMP VOTING ALGORITHM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	09/05/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
THOMAS, SHANE M	2186	711-151000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Ansel M. Schwartz

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Spinnaker Networks, Inc.

Pittsburgh, Pennsylvania

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 10

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- ☒ A check in the amount of the fee(s) is enclosed.
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- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-0737 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Ansel M. Schwartz

Date

9/5/06

Typed or printed name

Ansel M. Schwartz

Registration No.

30,587

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